



SAFI INSTITUTE OF ADVANCED STUDY, VAZHAYUR  
INTERNAL EXAMINATION COMMITTEE (IEC)  
RESIT APPLICATION FORM (2023-2024)

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1. Name of the candidate :
2. Class and semester :
3. Roll number of the student :
4. Date of Application :
5. Reason for resit :
6. Medical certificate submitted : YES / NO  
in case of medical emergency : (If yes, attach the copy)
7. List of examinations for resit

Sl no	Name of the Paper	Teacher in charge (Name & Sign)
1		
2		
3		
4		
5		
6		

8. Name and Signature of advisor :
9. Name and signature of HoD :

FOR OFFICE USE ONLY

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Signature of the IEC Convenor :

Signature of the Principal :